



July 6, 2015

Announcement 938

Nevada Medicaid Forms Can Now Be Submitted Using the Provider Web Portal

On July 1, 2015, HP Enterprise Services (HPES) completed updating all of the Nevada Medicaid forms that are available online at <https://www.medicaid.nv.gov/providers/forms/forms.aspx>. These forms have been updated to a format that allows them to be completed, downloaded and saved electronically.

In addition, an enhancement has been made to allow the following forms to be submitted online using the new "Upload Files" page on the Provider Web Portal:

- FA-17 Adult Day Health Care Services Prior Authorization Request
- FA-21 PASRR and LOC Data Correction Form
- FA-24 Personal Care Services (PCS) Prior Authorization/PCS Assessment Forms
- FA-24A Coordination of Hospice and Waiver or Personal Care Services (PCS)
- FA-24B Legally Responsible Individual (LRI) Availability Determination for the Personal Care Services Program
- FA-25 Handicapping Labiolingual Deviation (HLD) Index Report
- FA-26 Client Treatment History Report (For Medicaid Orthodontic Treatment)
- FA-26A Dental History Request
- FA-29 Prior Authorization Data Correction Form
- FA-31A Provider Re-Enrollment Application Packet (Individuals)
- FA-31B Provider Re-Enrollment Application Packet (Group/Facilities)
- FA-31C Provider Initial Enrollment Application Packet (Individuals)
- FA-31D Provider Initial Enrollment Application Packet (Group/Facilities)
- FA-31E Provider Enrollment Application for Ordering, Prescribing or Referring (OPR) Providers
- FA-32 Electronic Funds Transfer Agreement
- FA-33 Provider Information Change Form
- FA-34 Written Notice of Provider Termination
- FA-35 Electronic Transaction Agreement for Service Centers
- FA-36 Service Center Operational Information
- FA-37 Service Center Authorization
- FA-39 Payerpath Enrollment
- FA-60 MAC Pricing Appeal Form

The following types of forms may not be uploaded using the "Upload Files" page:

- **Prior Authorization Forms:** Submit through the Provider Web Portal Care Management tab as attachments when prior authorization requests are created. Note: This does not apply to ADHC, PASRR, PCS and Dental prior authorizations that cannot be submitted using the Provider Web Portal.
- **Sterilization/Abortion Forms:** Submit with appropriate claim form.
- **Appeal Forms:** Mail or email to Provider Claim Appeals.
- **Initial Emergency Dialysis Case Certification FA-100:** Submit with appropriate claim form.

Instructions for uploading forms:

To upload forms using the Provider Web Portal:

1. Open a web browser such as Internet Explorer or Firefox.
2. Enter www.medicaid.nv.gov in the address bar.

3. The Provider Web Portal Home page opens as shown below. Click **EVS**. The submenu displays “User Manual” or “HPES Login.”



4. Click **HPES Login**. The EVS Home page opens.

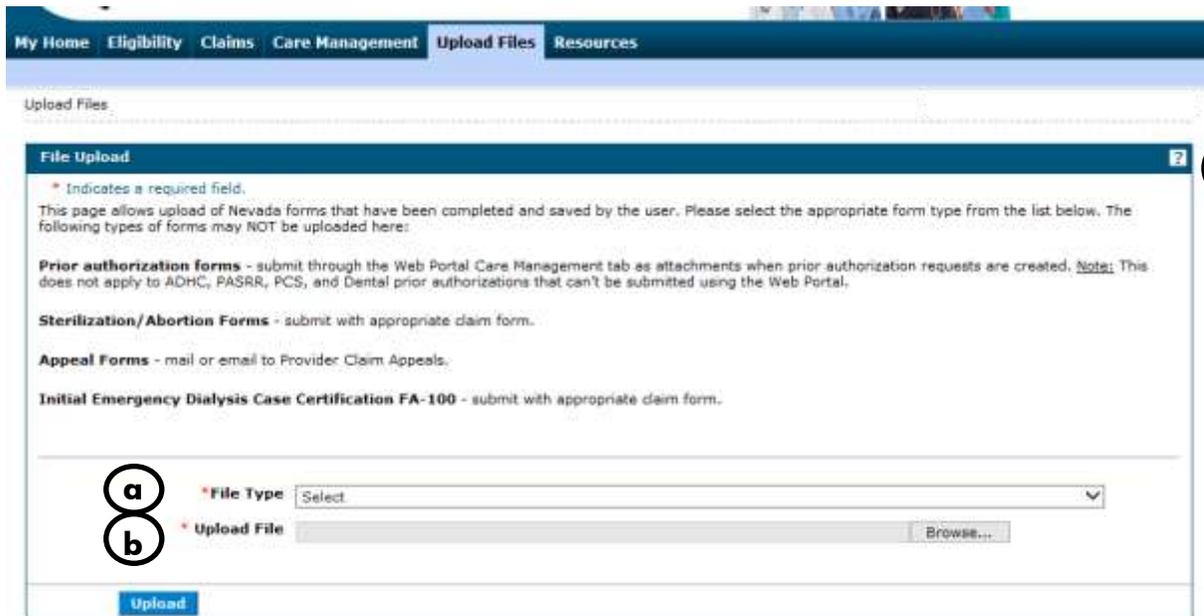


5. Log into the Provider Web Portal.

6. On the "My Home" page, click the "Upload Files" tab to open the "Upload Files" page.



Upload Files Page:



- a. File Type – The drop-down list contains all of the forms that can be uploaded using the Provider Web Portal.
- b. Upload File – Click on the "Browse" button to select the file you are uploading.
- c. Click on the (?) to display the Help page.

7. File Type – Select the form that will be uploaded using the drop-down list.

Upload Files

The screenshot shows the 'File Upload' page with a dropdown menu open for the 'File Type' field. The dropdown list includes the following options: Select, FA-17 Adult Day Health Care Services Prior Authorization Request, FA-21 PASRR and LOC Data Correction Form, FA-24 Personal Care Services (PCS) Prior Authorization / PCS Assessment Forms, FA-24A Coordination of Hospice and Waiver or Personal Care Services (PCS), FA-24B Legally Responsible Individual (LRI) Availability Determination for the Personal Care Services Program, FA-25 Handicapping Labiolingual Deviation (HLD) Index Report, FA-26 Client Treatment History Report (For Medicaid Orthodontic Treatment), FA-26A Dental History Request, FA-29 Prior Authorization Data Correction Form, FA-31A Provider Re-Enrollment Application Packet (Individuals), FA-31B Provider Re-Enrollment Application Packet (Groups/Facilities), FA-31C Provider Initial Enrollment Application Packet (Individuals), FA-31D Provider Initial Enrollment Application Packet (Groups/Facilities), FA-31E Provider Enrollment Application for Ordering, Prescribing or Referring (OPR) Providers, FA-32 Electronic Funds Transfer Agreement, FA-33 Provider Information Change Form, FA-34 Written notice of provider termination, FA-35 Electronic Transaction Agreement for Service Centers, FA-36 Service Center Operational Information, FA-37 Service Center Authorization, FA-39 Payerpath Enrollment, and FA-60 MAC Pricing Appeal Form.

8. Upload File – Upload the form from your computer to start the upload process. **Please note:** If multiple documents are being uploaded, please place all forms in a WinZip® file. For example, if a form needs to be signed please scan the signature page(s) and include that scan along with the completed PDF in the same WinZip file.

The screenshot shows the 'File Upload' page with the 'File Type' dropdown set to 'FA-33 Provider Information Change Form'. The 'Upload File' field contains the file path 'C:\Users\\Desktop\FA-33-ES.pdf' and a 'Browse...' button. The 'Upload' button is visible at the bottom.

9. Click the "Upload" button to upload the form. The following confirmation message will display to confirm the file was successfully uploaded.

The screenshot shows the 'File Upload' page with a confirmation dialog box titled 'File Exchange Confirmation' overlaid. The dialog box contains the message 'The file was successfully uploaded.' and an 'OK' button.